Form G-FtN Page 2 of 3



Properties Securities Dealer _nder Section 15C(a)(1)(B)

OFFICIAL USE

| Notice of Government Se | |
|-----------------------------|-------------|
| Activities to be Filed by a | 1404106 |
| of the Securities Exchange | Act of 1934 |

| Check appropriate regulatory a | gency (ARA): | | 2. | Conducts business | AS: | |
|---|--------------------------|-----------------------|----------------------|--|---|--|
| A. Comptroller of the Curre | ency | | | A. Government | Securities Broker | |
| B. Board of Governors of the Federal Reserve System | | | | B. Government Securities Dealer | | |
| C. Federal Deposit Insural | | • | | | Securities Broker and Dealer | |
| D. Securities and Exchange | • | | | o. Es coronnent | Occurries broker and bealer | |
| | | | 3. | Filing status of notice | e: | |
| | | | | A. Notice | | |
| | | | | B. Amendment | | |
| A. Full name of the financial in | stitution AMEGY B | ANK NAT | FIONAL A | ASSOCIATION | | |
| B. Address of principal office of | of financial institution | | | | | |
| 4400 POST OAK PARKI | WAY | | | | | |
| Address | | | | | | |
| HOUSTON City | TX | $-\frac{7702}{75000}$ | | | | |
| • | State | Zip Co | | | | |
| (if different from item (B)): | vhere government se | curities b | roker or g | government securities | dealer activities will be conducted | |
| | | | | SE | PIEDITIES ALIA PARETA AND MODERA AND AND AND AND AND AND AND AND AND AN | |
| Address | | | | | CURITIES AND EXCHANGE COMMISSION AFCETVED | |
| City | | | | PATRICULAR STATE OF THE STATE O | 1 8 4 4 3 4 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | |
| • | State | Zip Cod | de | | DEC 0 1 2014 | |
| D. Mailing address if different to | from (B) or (C): | | | | | |
| Address | | | | 1: | REGISTRATION BRANCH | |
| Vacioss | | | | L | | |
| City | State | Zip Cod | ie | | | |
| E. Name, title, and telephone i | number of contact pe | rson with | respect t | o this notice: | | |
| JOHN TIMOTHY SNIDE | 10171711071010101 | | IOR VIC | E PRESIDENT | 713-232-1725 | |
| Name | Name Title | | · | 1 | Area Code / Phone Number | |
| Does financial institution condu- location other than given in Que (If yes, provide addresses and | estion 4 above? | governme A. 🛛 Y | ent securit es B. | ties broker or governr | nent securities dealer activities at a | |
| (ii yes, provide addresses arid (| describe activities.) | | | | | |
| 4576 RESEARCH FOREST DR | THE WOODLANDS | TX | 77381 | SALES OF GOVER | NMENT SECURITIES | |
| Address | City | State | Zip Code | Describe Activities | | |
| 2501 N HARWOOD | DALLAS | 7X | 75201 | SALES OF GOVERN | NMENT SECURITIES | |
| Address | City | · State | Zip Code | Describe Activities | | |
| 10001 REUNION PLACE | SAN ANTONIO | TX | 78216 | SALES OF GOVERN | NMENT SECURITIES | |
| Address | City | State | Zip Code | | | |
| | | | | | | |
| Address | City | State | Zip Code | Describe Activities | - | |

| 6. | Furnish the name and title of each person who is directly engaged in the financial institution's government securities broker or government securities. | he management, direction, or supervision of any of the urities dealer activities: | | | | |
|----|---|---|--|--|--|--|
| | Full Name | | | | | |
| | GUYTON, JULIE ALLEN | SVP | | | | |
| | Last / First / Middle | Title | | | | |
| | JONES, SUZETTE WELLS | EVP, INVESTMENTS & TRUST MGR | | | | |
| | Last / First / Middle | Title | | | | |
| | KNELL, TERRY LYNN | VP, CHIEF COMPLIANCE OFFICER | | | | |
| | Last / First / Middle | Title | | | | |
| | OUYANG, JANE JIA | SVP, INVESTMENT OPERATIONS MGR | | | | |
| | Last / First / Middle | Title | | | | |
| | SNIDER, JR., JOHN TIMOTHY | SVP, PRIVATE CLIENT INVESTMENTS MGR | | | | |
| | Last / First / Middle | Title | | | | |
| | NOTE: Attach a separate Form G-FIN-4 (or, if previously filed, a conamed in Item 6. | ppy of Form MSD-4 or Form U-4) for each person | | | | |
| 7. | 7. Has any "associated person" (see definition in paragraph A.7. of the instructions) responded "yes" to any question in Item 17 of Form G-FIN-4, or "yes" to one or more questions in Items 23 through 26 of Form MSD-4 or Item 22 on Form U-4? A. Yes B. X | | | | | |
| | NOTE: The financial institution and the person executing this forremployers of any associated person during the immediately precaccuracy of the information furnished on Form G-FIN-4. (See 17 C Form MSD-4 and Form U-4. | eding three years for the nurnose of verifying the | | | | |
| 8. | The financial institution submitting this notice and the person excherein is true, current, and complete. | ecuting it represent that all of the information contained | | | | |
| | Please print name and title of person executing this notice: | | | | | |
| | JOHN TIMOTHY SNIDER, JR | | | | | |
| | Name (First, Middle, Last) SVP, PRIVATE CLIENT INVESTMENTS MANAGER | | | | | |
| | Title | | | | | |
| | | | | | | |